



Rehearsals Begin: Thursday, September 10 ♦ 4:00 - 5:30 pm

Parent Meeting: Thursday, September 10 ♦ 5:00 - 5:30 pm

Rehearsal Schedule: Mondays and Thursdays 4:00 - 5:30 pm

Performance Dates: October 16 & 17

Friday at 7:00 pm and Saturday at 2:00 pm and 7:00 pm

Ages: 5 - 11 **Tuition**: \$185.00

REGISTRATION INFORMATION (REGISTRATION WILL CLOSE AS PROGRAM FILLS)

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Participant Name				
Is this the participant's first ARIEL production?		Yes □	No □	
Date of Birth	Age	Female	Male □	
Grade School Name				
Mailing Address				
City	Zip Code			
Home Phone				
Parent/Guardian	Cell #			
Parent/Guardian	Cell #			
Email Contact				
Check here to be added to ARIEL's email contact list □				
How did you hear about ARIEL?				

Please submit completed form to ARIEL Theatrical. For fax or email, please call in credit card information. Enrollment confirmation will be by mail.

- ◆ Mail: ARIEL Theatrical, PO Box 1268, Salinas, CA 93902
- ◆ Email: ariel@arieltheatrical.org ◆ Phone: (831) 775-0976 ◆ Fax: (831) 256-7316
- ◆ The Karen Wilson Children's Theatre, 320 Main Street, Salinas
- ♦ www.arieltheatrical.org

PAYMENT INFORMATION

(PLEASE DO NOT SEND CASH BY MAIL OR EMAIL/FAX CREDIT CARD INFORMATION)

A \$75 non-refundable deposit (per program) is due upon enrollment. Tuition balance due prior to first rehearsal. Payment plans available.

Payment Method				
☐ Inspire Charter / Ocean Grove : Requested				
☐ Cas	h	Amount		
☐ Che	eck #	Amount		
☐ Credit Card (details below)				
Please charge my Visa ☐ MasterCard ☐				
Card #				
Expiration _		V-Code		
Amount to be charged at this time				
Name on Card				
Date:	Signatu	ure		

Little Red Riding Hood	Office Use Only	
Balance Due \$	Payment	Date
Early Bird N/A		
Paid in Full □		